

**IN THE COURT OF COMMON PLEAS
FAMILY COURT DIVISION
STARK COUNTY, OHIO**

IN THE MATTER OF:

_____, a Minor

CASE # _____

Name

JUDGE _____

Street Address

City, State & Zip

Mother/Father/Plaintiff/Petitioner/_____ (circle one)

v./and

Name

Street Address

City, State & Zip

Mother/Father/Defendant/Petitioner/_____ (circle one)

NOTICE OF HEARING AND REQUEST FOR SERVICE

A hearing shall be held on the _____ day of _____ 201_____
at _____ a.m./p.m. at the Stark County Family Court located at 110 Central
Plaza South, 6th Floor, Canton, Ohio 44702.

Instructions: This form is used when you want to ask for documents to be sent (served) to the other party. You must MARK the line with an "X" for the type of service you are requesting. You must serve Mother, Father, any current Legal Custodian and the Department of Jobs & Family Services if that agency has been involved in the life of the child(ren).

TO THE CLERK: Please serve the pending documents on the following parties listed below:

_____ **Defendant/Petitioner** at the address listed above

_____ Certified Mail, Return Receipt Requested
_____ Issuance to Sheriff of _____ County for
_____ Personal or _____ Residence Service
_____ Ordinary US Mail, evidenced by a certificate of mailing
_____ Other (specify) _____

_____ **Plaintiff/Petitioner** at the address shown above

_____ Certified Mail, Return Receipt Requested
_____ Issuance to Sheriff of _____ County for
_____ Personal or _____ Residence Service
_____ Ordinary US Mail, evidenced by a certificate of mailing
_____ Other (specify) _____

_____ **Stark County Child Support Enforcement Agency**, 122 Cleveland Ave. N., Canton, OH 44702 or

_____ **County Child Support Enforcement Agency** (provide address)

(_____)
_____ Certified Mail, Return Receipt Requested
_____ Issuance to Sheriff of _____ County for
_____ Personal or _____ Residence Service
_____ Ordinary US Mail, evidenced by a certificate of mailing
_____ Other (specify) _____

_____ **Stark County Department of Jobs & Family Services**, 300 Market Ave. N., Canton, OH 44702

_____ Certified Mail, Return Receipt Requested
_____ Issuance to Sheriff of _____ County for
_____ Personal or _____ Residence Service
_____ Ordinary US Mail, evidenced by a certificate of mailing
_____ Other (specify) _____

_____ **Other** (Name) _____

(Address) _____
_____ Certified Mail, Return Receipt Requested
_____ Issuance to Sheriff of _____ County for
_____ Personal or _____ Residence Service
_____ Ordinary US Mail, evidenced by a certificate of mailing
_____ Other (specify) _____

Your Signature

Your Address

Your Name (printed)

Your Phone Number